“Can South Africa afford not to implement PrEP?”

The landmark decision by the US Food and Drugs Administration concerning TRUVADA as pre-exposure prophylaxis (PrEP) was met with approval by Professors Salim and Quarraisha Abdool Karim, but they asked the question “Can we afford not to implement PrEP?”

The opinion article, published in The Lancet online, discussed the importance of the FDA’s decision and its implications going forward.

They argued that that despite the limitations of PrEP, it is an important new strategy, which provides an additional option for HIV prevention, with the potential to significantly reduce HIV acquisition, especially in men who have sex with men (MSM), discordant couples and in young women where mutual monogamy and condom use may be challenging options.

PrEP has a unique advantage for young women in southern Africa, who bear a disproportionate burden of the HIV epidemic. Persuading their male partners to use condoms, remain faithful or have an HIV test are often not possible achieve, putting women at risk of acquiring HIV, and thereby disempowering women and undermining their efforts to control their HIV risk.

The FDA’s Advisory Committee’s support of the use of oral Truvada is a major boost to the translation of the trial findings into policy and programmes.

This key milestone is all the more significant as the FDA last approved a technology to prevent sexual transmission of HIV about 20 years ago, when it approved the female condom.

If the FDA, which is anticipated to make its decision by 15 June 2012, adopts the Advisory Committee’s recommendations, TRUVADA will become the first antiretroviral drug to be approved as PrEP for the prevention of HIV, paving the way for implementation and access for populations who could benefit most from this new prevention strategy.

To read the entire correspondence, visit: Antiretroviral prophylaxis for HIV prevention reaches a key milestone http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(12)60786-7/fulltext
Opportunities to improve sexual reproductive health at schools

Study determining HIV prevalence among high school learners shows that knowledge of HIV status provides an important gateway to prevention and treatment services.

The findings of an anonymous survey in learners in two public sector high schools in rural Vulindlela, KwaZulu-Natal, determined that knowledge of HIV status provides an important gateway to prevention and treatment services.

This study was aimed at determining HIV prevalence and explored the feasibility of HIV testing among high school learners.

Young girls in sub-Saharan Africa are reported to have higher rates of HIV infection compared to boys in the same age group. Early sexual debut is associated with higher teenage pregnancy rates, sexually transmitted infections and poor school completion rates leading to poor health and economic outcomes in young women. Recent reports indicate that the learner pregnancy rate in KwaZulu-Natal stood at 62.2 per 1000.

The results of the study showed that the HIV prevalence in learners aged 12 to 25 in school A was 4.7% compared to 2.5% in school B. Whilst the HIV prevalence was similar for boys at 1.3% in school A and 1.7% in school B, the prevalence in girls was consistently higher and was 7.7% in school A and 3.2% in school B. The age-specific HIV prevalence in girls increased 1.5 to 2 fold for each two year age category, while for boys the prevalence was stable across all age groups.

As young people in South Africa are becoming sexually active at younger ages, the authors recommend that early and regular HIV testing should become part of their routine healthcare.

As well as enhancing self esteem and thereby reducing or delaying early sexual debut, HIV and STI risk reduction programmes at schools would contribute to reducing the stigma of HIV testing among high school learners.

For further reading see:
www.biomedcentral.com/1471-2458/12/231/abstract

US Senators visit CAPRISA’s clinics during SA tour

CAPRISA was honoured to host a high-ranking political delegation from the United States, who visited CAPRISA’s eThekwini and Vulindlela Clinical Research Sites on Thursday 3 and Friday 4 May 2012. The delegation was conducting a visit to South Africa to tour various institutes and projects that form part of the international health related programmes funded by the US government.

Senator Tom Harkin led the delegation, which included fellow Senators, Tom Udall and Roger Wicker, US Ambassador Donald Gips, Consul General Taylor Ruggles, Dr Tom Frieden of the Centers for Disease Control & Prevention, and Dr Gray Handley from National Institutes of Health.

Clockwise from bottom left: Professor Salim Abdool Karim (CAPRISA Director), MEC for Health Dr Sibongeseni Dhlomo, Dr Nancy Knight (South Africa Country Director: Centers for Disease Control & Prevention), Senator Roger Wicker, Senator Tom Udall, Senator Tom Harkin, Mr Erik Fatemi (Senate staffer), Dr Tom Frieden (Director: Centers for Disease Control & Prevention), Mr Taylor Ruggles (US Consul General), Dr Gray Handley (National Institutes of Health) at the start of the delegation’s visit to CAPRISA’s eThekwini Clinic.
Spotlight on CAPRISA training

If great scientific achievements of the future are built on new scientific thinking of today, how can we ensure that innovation is part of a culture and not a “nice to have”?

For nearly 10 years, CAPRISA has been nurturing young scientists through its training programme of pre– or post-doctoral students funded by CAPRISA, self-funded fellows through partner academic institutes, or medical students recruited into the medical research placement programme.

In this profile of three international fellows and a South African medical placement, we provide a snapshot of the work of these young researchers and also find out how their time at CAPRISA has enriched them.

Final year NYU medical student, Ben Bearnot believes that his fellowship with CAPRISA has placed him in a better position to participate in clinical research.

In an effort to re-energise HIV counseling and testing at UKZN, Ben formed various collaborations to increase HIV testing among students.

“There is tremendous energy surrounding the UKZN HIV testing programme and, after the success of our pilot project, we are optimistic about sustaining and extending our services at other campuses.” - Ben

Through the VIP campaign (value in prevention), students were invited to attend sessions led by peer educators, at which VIP gold referral cards were distributed. Students were encouraged to present their VIP card at the HIV counseling and testing clinic, and to hand them out via their social networks to encourage more students to test as well.

Within the first two months of the campaign, 750 UKZN students and staff underwent an HIV test — more than double for the whole of 2011.

As his main project, New York University medical student, Gabriel Cohen has been working on a retrospective data analysis looking at the relationship between the level of educational attainment and clinical outcomes in the CAPRISA TB/HIV co-infected.

“I’ve had a very productive year at CAPRISA and have thoroughly enjoyed my time in South Africa” - Gabriel

He has co-authored a review article entitled: Contraception and Pregnancy in Microbicide Trials, reflecting on pregnancy and contraceptive management strategies in microbicide trials. Mitsuaki Andrew Tomita is excited at the news that he will be spending another year at CAPRISA to continue with his research.

Andrew is a post-doctoral fellow with a doctorate in social work. Against the background of the predominance of traditional healers in healthcare — usually and often the only port of call for patients with first episode psychotic disorder — Andrew’s research at Townhill Hospital, Kwa Zulu Natal, is looking into formal access to psychiatric care and identifying the facilitators and barriers to seeking help in the mental healthcare system. The study also includes investigation into the potential misuse of ARV medications.

“Thanks to CAPRISA, I’ve been able to conduct this unique research in South Africa, built upon their expertise in HIV/AIDS and their established relationships and trust with local stakeholders, including tribal chiefs” - Andrew

Despite her demanding schedule at the University of KwaZulu Natal Medical School, Ayanda Sibiya has managed to dedicate time for her research project which evaluated CycleBeads (pictured below) as a tool for promoting knowledge of menstrual cycles.

Through a series of workshops with young females aged 12-20 years, Ayanda assessed participants knowledge about menses, fertility, the detection of menstrual abnormalities, self-esteem, and the effect of problems with menses on daily routine.

She concluded that education and information were vital for factual understanding of menstruation. Amongst her recommendations were the provision of CycleBeads by government or NGOs to female school learners; and more content on menstruation in life orientations classes.

“I will need research exposure, if I go on to specialise later, and my time at CAPRISA is helping me towards that goal.” - Ayanda

As a result of Ayanda’s work, CAPRISA will be distributing handmade CycleBeads to young girls as part of its sexual reproductive health programme in schools.
Research papers published in 2012

10# Daftary A, Padayatchi N. Social constraints to TB/HIV healthcare: Accounts from coinfected patients in South Africa. AIDS Care 2012. DOI:10.1080/09540121.2012.672719


# continued from previous issue

Scientific Reviews

<table>
<thead>
<tr>
<th>Abstracts submitted for review</th>
<th>Manuscripts submitted for review</th>
<th>Ancillary studies submitted for review</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total#</td>
<td>Cumulative#</td>
<td>Total#</td>
</tr>
<tr>
<td>1</td>
<td>279</td>
<td>3</td>
</tr>
<tr>
<td>Cumulative#</td>
<td>215</td>
<td>1</td>
</tr>
</tbody>
</table>

# for month, * since committee initiation
<table>
<thead>
<tr>
<th>Conference</th>
<th>Dates</th>
<th>Abstracts</th>
<th>Registration</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Durban, South Africa</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Washington DC, USA</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boston, USA</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paris, France</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Keystone, Colorado, USA</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Durban, South Africa</td>
<td></td>
<td></td>
<td>2 Sep 2012</td>
<td></td>
</tr>
</tbody>
</table>